

Phase 1 - 2003 Stakeholder and Expert Review

Evaluation Team: The evaluation team, led by RAND, includes the Harvard Medical School Department of Health Care Policy, the Colorado Foundation for Medical Care, and Carelink. Since the onset of the project, the scope of work has been modified and the evaluation team has expanded to include a national VA nursing home research collaborative from Los Angeles, CA, Philadelphia, PA, Bedford, MA and Atlanta, GA.

Evaluation Criteria: In undertaking this revision of the minimum data set (MDS), Centers for Medicare & Medicaid Services (CMS) worked with stakeholders to identify several objectives. A primary goal is that revisions should improve the clinical relevance of the MDS's screening and assessment items. This can best be accomplished by incorporating the experience of MDS users, incorporating advances in assessment science, and improving the accuracy of reports. Another important goal, closely related to relevance, is increasing the efficiency of reports or gaining useful information with the least possible provider burden. Finally, revisions aim to maintain the ability of CMS to use MDS data for quality measures, and payment (resource utilization groups-III [RUGs-III] classification). The current MDS evaluation project is divided into 5 phases, described below.

Phase 1: Obtain Stakeholder and Expert Feedback on MDS 2.0 and proposed MDS 3.0

To initiate this revision process, CMS worked with content experts and small working groups to explore possible revisions to the MDS. Based on experience with the MDS and this input, CMS released a draft MDS 3.0 for public comment in April 2003. RAND has subsequently employed several approaches to obtain and synthesize stakeholder feedback and input on the MDS 2.0 and proposed changes to the MDS 3.0.

Matrix of Written Commentaries

CMS posted the April 2003 draft MDS 3.0 on a publicly available web site and invited any interested party to submit written comments. RAND conducted content analysis of these comments. Over 1266 unique comments were received from 144 different groups or individuals. The comments included suggested modifications to the MDS, recommendations to add or delete items and policy questions or statements.

Town hall Meeting

Interested parties were provided an open forum in which they could hear plans for the evaluation and provide comment on the MDS. The meeting was held at CMS offices in Baltimore, Maryland. Teleconference was also made available. Seventy-seven persons registered attendance and 426 conference call-ins were recorded. All oral comments were transcribed and reviewed by the research team.

Technical Expert Panel

The Commonwealth Fund provided RAND a grant to convene a national panel of nursing home experts. 45 groups nominated over 150 individuals for possible inclusion in this or the validation panel (described below). The research team reviewed the nominees' qualifications and resumes, aiming to identify a panel with a wide range of perspectives and with experience in NH care delivery, management & quality improvement across MDS items. Panel members, listed below, provided valuable input into the MDS.

Panelist	Organization
Sarah Greene Burger, RN	National Citizen's Coalition for NH Reform
Diane Carter, RN, MSN	Amer Assoc Nurse Assessment Coordinators
Anne Deutsch, Ph.D.	Northwestern University
Sandy Fitzler, BSN	American Health Care Association
Irene Fleshner, RN	Senior Clinicians Group
Christa Hojlo, PhD	VA Nursing Home Service
Ruta Kadonoff, MHS	Amer Assoc Homes & Services for the Aging
Sally Kaplan, PhD	Med PAC
Courtney Lyder, ND	University of Virginia, School of Nursing
Cherry Meier, RN	National Hospice and Palliative Care Org
Sue Nonemaker, RN	Hebrew Rehabilitation Center for the Aged
Joe Ouslander, MD	Emory University & Atlanta VHA
Peter Rabins, MD	John Hopkins University
Naomi Salamon, RN	North Shore Univ. Hosp Extended Care & Rehab
Judith Salerno, MD	National Institute on Aging
Eric Tangalos, MD	Mayo Clinic

The Technical Expert Panel (TEP) participated in a two-day meeting to discuss the current function of the MDS, short-range goals for the upcoming revision and long-range goals for future revisions of the MDS. The TEP's short-term goals included prioritizing MDS's function as a clinical tool and enhancing its efficiency to screen for important issues. The TEP identified a long-range goal of moving toward standardized nomenclature and integrated electronic health records. The panel also reviewed sections of the MDS that generated significant commentary in written feedback and rated the clinical, quality and cost measurement utility of various MDS domains.

Validation Panel

RAND and Harvard convened a second panel, again selecting from the list of 150 nominations for expert panel membership. For the validation panel, the team aimed to identify members who had broad experience with nursing home care, evidence-based nursing home research and scientific review. The panel members are listed below. The panel was provided with a literature synthesis for several key sections of the MDS and available data on reliability for MDS items. In addition, the research team highlighted written feedback and technical expert panel input for the panel. A member of the technical expert panel was also on the validation panel in order to ensure communication of the expert panel feedback.

Panelist	Organization
Dan Berlowitz, MD, MPH	Boston University & Bedford VHA
Barbara Bowers, RN, Ph.D.	University of Wisconsin
Richard Della Penna, MD	Kaiser Permanente Aging Network
Marcy Harris, RN, Ph.D	Mayo Clinic
Ira Katz, MD, Ph.D.	University of Pennsylvania & Philadelphia VHA
Paul Katz, MD	University of Rochester
Rosemary Lubinski, Ed.D.	University at Buffalo
David Mehr, MD, MS	University of Missouri
Vince Mor, Ph.D.	Brown University
Christine Ann Mueller, RN, Ph.D	University of Minnesota
Patricia Parmelee, Ph.D.	Emory University & Atlanta VHA
Margaret Schenkman, PT, Ph.D.	University of Colorado
Neville Strumpf, RN, FAAN, Ph.D.	University of Pennsylvania
Eric Tangalos, MD	Mayo Clinic
Christie Teigland, Ph.D.	NY Assoc. of Homes & Services for Aging
Sheryl Zimmerman, MSW, Ph.D.	University of North Carolina at Chapel Hill

The panel used a modified Delphi process to provide quantitative feedback on the validity and feasibility of 438 proposed MDS items. The panel voted by confidential ballot prior to the meeting, had a two-day face-to-face meeting for discussion and re-voted by confidential ballot. Follow-up calls have also been conducted to address specific topics and challenges.”